

JAMES E. RISCH
Governor

State of Idaho
DEPARTMENT OF INSURANCE

700 West State Street, 3rd Floor
Boise, Idaho 83720-0043
Phone (208)334-4370
FAX # (208)334-4375

SHAD PRIEST
Acting Director

MARK LARSON
State Fire Marshal

FIRE PROTECTION SPRINKLER CONTRACTORS LICENSE
RENEWAL APPLICATION FORM FOR PRIMARY AND/OR BRANCH OFFICE

IDAPA 18.01.49

Annual License Renewal Fee	\$100.00	_____
Duplicate License Fee	\$ 10.00	_____
Branch Office Renewal Fee	\$100.00	_____

Date _____

Name of Firm _____

Address _____ City _____

State _____ Zip _____

Phone _____ Fax _____ E-mail _____

Applicant's Name _____ Title _____
(Owner, Officer, Manager)

Branch Office _____

Applicant's Signature _____

Name of Nicet III Certificate Holder _____

In accordance with IDAPA - 18.01.49, Section 016 each applicant must have in effect at all times insurance for license bond in the amount of \$2,000 and proof of liability aggregate limits of not less than \$250,000.

DO NOT WRITE BELOW THIS LINE

License Number Assigned _____ Date of Issue _____

Financial information up-to-date: Yes ☐ No ☐

This application has been Approved ☐ Disapproved ☐

Idaho State Fire Marshal _____

Date _____

Rev. 12/2004

Equal Opportunity Employer